



04-17-3

RCE/1600

PTO/SB/30 (01-03)

Approved for use through 04/30/2003. OMB-0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Request For Continued Examination (RCE) Transmittal

Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

<i>Application Number</i>	08/779,767
<i>Filing Date</i>	01/07/1997
<i>First Named Inventor</i>	Habib Zaghouani
<i>Art Unit</i>	1644
<i>Examiner Name</i>	P. Nolan
<i>Attorney Docket Number</i>	ALLIA.143A

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on 12/19/02
(Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Rely Brief previously filed on _____
 - iii. Other _____
- b. Enclosed
 - i. Amendment/Reply
 - ii. Affidavit(s)/ Declaration(s)
 - iii. Information Disclosure Statement (IDS)
 - iv. Other _____

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. Other _____

3. Fees

- The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- The Director is hereby authorized to charge the following fees, or credit any overpayments, to

- a. Deposit Account No. 011008
 - i. RCE fee required under 37 CFR 1.17(e)
 - ii. Extension of time fee (37 CFR 1.136 and 1.17)
 - iii. Other any necessary fees _____
- b. Check in the amount of \$ _____ enclosed
- c. Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	John Wurst	Registration No. (Attorney/Agent)	40,283
Signature	<u>John Wurst</u>	Date	4/15/03

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

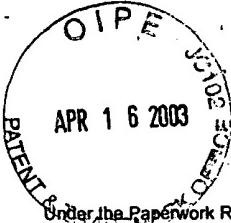
Name (Print/Type)	Nikki Weaver
Signature	<u>Nikki Weaver</u>
Date	4/16/03

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box RCE, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

04/16/2003 RHEBRAHT 00000056 011008 08779767

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APR 16 2003

PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	09/779,767	
	Filing Date	01/07/1997	
	First Named Inventor	Zaghouani	
	Group Art Unit	1644	
	Examiner Name	P. Nolan	
Total Number of Pages in This Submission	4	Attorney Docket Number	ALLIA.143A

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Alliance Pharmaceutical Corp John Wurst, Reg. No. 40,283
Signature	
Date	12/18/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

December 19, 2002

Typed or printed name	Christine Hughey
Signature	
Date	12/19/2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**UTILITY/DESIGN PATENT**

Rec'd in the U.S. Patent & Trademark Office on the date stamped hereon via Certificate of Mail:

Case # Allia.143A S/N: 09/779,707 Filed: JANUARY 7, 1997Pat # Unknown Issued: UnknownExaminer: P. Nolan Art Unit: 1644 Atty: JDN/NAIApplicant: ZagharyaniTitle: Compounds, Compositions and Methods for the
Endocytic Presentation of Immunosuppressive
Factors Transmittal Form Amendment and Response to Office Action in 3 pages Return PostcardDate: December 19, 2002

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**ALLIANCE PHARMACEUTICAL CORP.**

Attn: Patent Department
6175 Lusk Blvd.
San Diego, CA 92121

**UTILITY/DESIGN PATENT**Date: April 14, 2003Rec'd in the U.S. Patent & Trademark Office on the date stamped hereon via Certificate of Mail:
Case # ALLA 143A S/N: 08,779,767 Filed: JAN 7, 1997Pat # UNKNOWNIssued: UNKNOWNExaminer: P. NISLANArt Unit: 1644 Atty: JOHN WURSTApplicant: ZAGHOVANITitle: COMPOUNDS, COMPOSITIONS AND METHODS FOR THE
ENDOCYTIC PRESENTATION OF IMMUNOSUPPRESSING FACTORSCERTIFICATE OF EXPRESS MAILING EL879045042 USRCE TRANSMITTAL (IN DUPLICATE)RCE WITH ATTACHMENT OF PREVIOUSLY FILED RESPONSE Return Postcard

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**ALLIANCE PHARMACEUTICAL CORP.**

Attn: Patent Department

3810 Science Park Rd. 6175 LUSK BLVD
San Diego, CA 92121

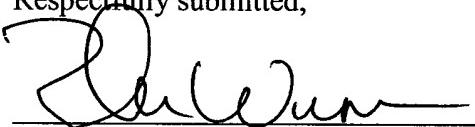
Serial No.: 08/779,767
Applicant : Zaghouani
Attorney Docket No.: ALLIA.143A

Enclosed are:

- (X) An Amendment in 3 pages (previously filed on Dec. 19, 2002 in response to Final Office Action of 10/21/2002)
- (X) Copy of Transmittal/Certificate of Mailing (previously filed with above Amendment)
- (X) Copy of return postcard (for previously filed above Amendment)
- (X) Please charge Deposit Account No. 01-1008 in the amount of \$355.00 for the RCE fee.
- (X) If for some reason Applicant has not paid a sufficient fee for this response to prevent the abandonment of this application, please consider this authorization to charge our Deposit Account No. 01-1008 for any fee, which may be due. Similarly, please credit any overpayment to Deposit Account No. 01-1008. A duplicate copy of this sheet is enclosed.
- (X) A return postcard.

Dated: 4/14/03

Respectfully submitted,


John Wurst
Registration No. 40,283
(858) 410-5174